



## **CDBG APPLICATION, OVERVIEW & INSTRUCTIONS**

### **CITY OF DOVER, NH COMMUNITY DEVELOPMENT BLOCK GRANT FY2023**

#### **OVERVIEW**

The City of Dover is an entitlement community that receives Community Development Block Grant (CDBG) funding from the U.S. Department of Housing and Urban Development (HUD). CDBG funds may be used to carry out a wide range of community development activities directed toward revitalizing neighborhoods, economic development, and providing improved community facilities and services for lower-income residents.

#### Eligible Activities:

1. The proposed activity or project meets one of the following HUD National Objectives:
  - a) benefit low and moderate income persons;
  - b) activities that aid in the prevention of slums or blight; or
  - c) other community development needs to address a federally declared emergency.
2. The proposed activity or project qualifies as an “eligible activity” pursuant to HUD regulations.
3. The project or activity directly addresses one or more of the Goals and Objectives that will be adopted as part of the FY21-FY25 Consolidated Plan. See “Goals” below.
4. Through the application, the applicant and the proposed project or activity, demonstrates capacity to comply with all HUD and CDBG related requirements
5. Public facilities projects, as demonstrated through the application process, have a high likelihood of beginning within the year and being completed within two years.
6. Seventy percent (70%) of the clientele for the proposed project or activity will qualify as “presumed benefit” or very low, low or moderate income.
7. A minimum of 51% of the clientele for the proposed project or activity will qualify as “presumed benefit” or very low, low or moderate income.

Presumed Benefit Clientele: Abused/neglected children, homeless persons, persons with /HIV/AIDS, elderly persons , severely disabled adults, migrant farm workers, battered spouses/domestic violence victims, illiterate adults

Eligible Expenses: The cost of labor, supplies, and/or materials required for the provision of services to agency clientele.

Tracking of Expenses: Grant recipients must be able to specifically identify and document how the CDBG funds were expended on an eligible activity.

## DOVER CONSOLIDATED PLAN GOALS

Goal #1:	Access to Services
Goal Description:	To provide increased opportunities to residents of the City who require education, health, recreation, shelter, transportation and related human services.
Goal #2:	Renter and Homeowner Assistance
Goal Description:	Weatherization and energy efficiency, Housing unit rehab, security deposit assistance, Lead based paint hazard.
Goal #3:	Public Improvements
Goal Description:	Development and improvements related to facilities and housing units utilized by qualifying populations and individuals.
Goal #4:	Economic Development
Goal Description:	Improvements, and the support of efforts, intended to promote economic development and to enhance economic opportunities for qualifying business, populations and individuals.
Goal #5:	Accessibility and Transportation
Goal Description:	Access to social services and employment and removal of architectural barriers.

## CONSTRUCTION / FACILITIES PROJECT REQUIREMENTS

The City of Dover's CDBG grant program is federally funded through the U.S. Department of Housing and Urban Development (HUD). As such, a number of federal laws and regulations apply to CDBG funds and CDBG grant applicants and recipients. For construction and facilities projects—projects that involve some element of physical work, as opposed to funding for salaries, equipment, etc.—the Davis-Bacon Act, environmental review regulations, and Section 3 regulations apply.

### Davis-Bacon Act Requirements:

The Davis-Bacon Act requires the payment of a federal minimum wage rate to laborers. The wage rate is subdivided into specific job classifications. Current wage rate determinations can be obtained from <http://www.wdol.gov/dba.aspx>. Language pertaining to Davis-Bacon requirements must be included in all subcontracts related to the project. Also, the wage rate determination and U.S. Department of Labor "Know Your Rights" poster must be posted at the project site, and weekly payroll sheets must be submitted to the City for review and approval. The Community Development Coordinator will visit the project site to conduct site interviews with the laborers during the actual performance of the project.

***Please make sure that the three bids/quotes you receive for your project include Davis-Bacon wage rates, which may be higher than the contractors' usual wages.***

### Environmental Review Requirements:

The National Environmental Policy Act applies to all HUD-funded projects. An environmental review, which is conducted by the Community Development Coordinator, must be completed before any work on the project can begin. This includes what HUD describes as "choice-limiting activities," per 24 CFR 58.22, which include:

- Property acquisition (buying and leasing)
- Entering into contracts for project-related work
- Demolition
- Rehabilitation
- Construction
- Site improvements

***Please note that a project becomes a "HUD project" upon submission of this grant application.***

### Section 3 Requirements:

Section 3 of the Housing and Urban Development Act ("Section 3"), located at 12 U.S.C. 1701u, encourages that economic opportunities generated by HUD assistance shall to the greatest extent possible be directed to low- and very low-income persons, particularly such persons who are residents of public housing. Regulations regarding these requirements can be found at 24 CFR 135.

Please be aware that, if a CDBG grant is awarded, the City of Dover's contract with your agency will include the requirement that contracting preference be given to Section 3 businesses. This provision will also be required to be included in all subcontracts related to the project, as well.

### **MONITORING AND ASSESSMENT**

HUD requires recipients of federal funding to assess the outcomes and productivity of programs and activities. The information requested in the application will help the City assess and report your accomplishments.

### **DEFINITIONS / DESCRIPTIONS**

The following definitions/descriptions are for the questions found in the Application. Please call the Planning and Community Development Department at 603-516-6008 if you have any questions.

Beneficiaries: The number of unduplicated Dover beneficiaries that will benefit from this CDBG funded activity.

Narrative – Public Services Activity Only: Detailed description of the Activity, for which you are seeking assistance. Do not provide information about the Organization.

Narrative – Public Facilities Project Only: Detailed description of the Project for which you are seeking assistance. Do not provide information about the Organization.

Performance Outcome Measures: Please provide the *Outcome* proposed and the method of *Measurement* proposed to measure the Outcome. You may list multiple Outcomes/Measures. Please be realistic and specific when proposing Outcomes and method of Measurement.

Description of Organization: Please provide a description for the Organization. This does not need to be extensive.

Funding Sources: Provide a listing of all funding sources to be used for the activity or project. Provide the financial amount proposed for each source. Also indicate how much of the funding is secured, and how much is proposed, at the time of this application. The category of "Other" can be used for activities such as Capital Campaigns or other fund raising efforts

Organizational Commitment: For Public Facility projects (construction/physical improvement projects) only. Indicate how much of the project cost the organization will be providing toward the project.

### CDBG APPLICATION SCHEDULE

The Annual Action Plan is created through a public process. The first phase of this process is receipt of applications for funding for FY2023. Complete applications are due by the date and time provided in Table 1, below.

**TABLE 1: APPLICATION SCHEDULE**

<b>Date &amp; Time</b>	<b>Subject</b>	<b>Purpose</b>	<b>Location</b>
October 6, 2021	Applications Available	Solicit requests for funding	Community Development Department, Media and Online
October 6, 2021, – November 19, 2021	Technical Assistance	Assistance in completing the CDBG application: Call or email the Community Development Department, Dave Carpenter, at 603-516-6008 / <a href="mailto:d.carpenter@dover.nh.gov">d.carpenter@dover.nh.gov</a>	–
November 19, 2021 @ 4:00 p.m.	Application Deadline	Deadline to submit a completed APPLICATION and required documents.  The City of Dover is not required to consider applications delivered, mailed or emailed, but not received, prior to the deadline or at the location indicated.	Email to Dave Carpenter, Community Development Planner, at <a href="mailto:d.carpenter@dover.nh.gov">d.carpenter@dover.nh.gov</a>

**Note:** Due to email size restrictions, you may be required to send more than one email in order to submit all of the required information.

### PLANNING BOARD AND CITY COUNCIL REVIEW

This is a competitive grant program with no guarantee of funding. As indicated above, the Annual Action Plan is created through a public process. The Planning Board will review all complete applications that are received by the deadline at the location identified in Table 1 above. After conducting a public hearing, the Planning Board will make a recommendation to the City Council. The City Council will then hold a public hearing to review and approve an Annual Action Plan. After the required public notices and comment periods, the locally approved Annual Action Plan will then be provided to Housing and Urban Development (HUD) for final review and approval.

The Planning Board and City Council meetings are open to the public and televised.

Proposed Planning Board and City Council meeting dates for review of the proposed Annual Action Plan will be announced on or after January 3<sup>rd</sup>, 2022.

## APPLICATION SUBMISSION INSTRUCTIONS

### Submission Requirements

- Intent to submit: Please provide email notification of your intent to submit an application by **October 29, 2021** to Dave Carpenter@: [d.carpenter@dover.nh.gov](mailto:d.carpenter@dover.nh.gov)
- Applications will be accepted by email only.
- Applications are due by 4:00 p.m. on November 19, 2021. Please email your complete and signed application to Dave Carpenter, Community Development Planner, at [d.carpenter@dover.nh.gov](mailto:d.carpenter@dover.nh.gov)
- All required documents must be received at the email address listed above no later than 4:00 p.m. on November 19, 2021. The City of Dover reserves the right to reject any requests that are found incomplete or not received by the required deadline.

**If you have questions or would like guidance in developing the application, please contact the Dave Carpenter at the email address listed above or at 603-516-6008. We will be happy to assist you.**

### Required Submission Material

- **CDBG APPLICATION, OVERVIEW & INSTRUCTIONS:** Pages 6-13 completed in entirety & Signed/Dated.
- Federal Funding Accountability and Transparency Act (FFATA) Checklist (p 14). If applicable, complete the form and sign. If not applicable, indicate on the form and sign.
- Written quotes. Quotes are required for proposed purchase of items exceeding \$3,000.00. Quotes are also required for all Public Facility projects (i.e. building expansion, new roof, replacement of windows, etc.).
- Most recent financial audit with management letter and, if applicable, corrective action plan must be included with the application. Please do not omit the management letter; your application is not complete without this key element of your annual audit.
- *if new applicant and filing as a 501(c)(3) organization* - IRS determination of 501(c)(3) status.
- Do not submit items such as letters of support, resumes, brochures, newspaper articles, or other related materials.

**Note: Due to email size limitations, you may need to send more than one email in order to submit all of the required information.**

### Application Deadline:

- Applications will be accepted by email only. Applications are due by 4:00 p.m. on November 19, 2021.
- Please email your complete and signed application to Dave Carpenter, Community Development Planner, at [d.carpenter@dover.nh.gov](mailto:d.carpenter@dover.nh.gov)

## APPLICATION

APPLICANT INFORMATION	
Organization	Tax ID
Name of Program or Project	
Name of Executive Director	
Mailing Address Physical Address	
Contact Person	Phone
E-Mail	Website
<p><b>Please Identify the Type of Organization Applying for Funds</b> <i>(Note: More than one may apply)</i></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> 501(c)(3) Government         </div> <div style="width: 30%;"> <input type="checkbox"/> For-profit authorized under 570.201(o)         </div> <div style="width: 30%;"> <input type="checkbox"/> Unit of         </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Faith-based Organization         </div> <div style="width: 30%;"> <input type="checkbox"/> Institution of Higher Education         </div> </div> <input type="checkbox"/> Other (Explain):	
Tax ID #	
*DUNS #	*SAM Expiration Date

### ACTIVITY or PROJECT INFORMATION

ACTIVITY OR PROJECT INFORMATION
Amount of Dover CDBG funds requested for activity/project: \$
Provide a <u>very brief</u> summary of the <u>activity</u> or <u>project</u> for which the funds are requested. Keep responses to one or two sentences ( <i>i.e. After School Care for K-4<sup>th</sup> grade students. Repair of homeless shelter roof.</i> )

PROJECT LOCATION
Location(s) where services will be provided or physical improvements will be made.

BENEFICIARIES
<p><b>Beneficiaries:</b></p> <p>For <b>FY 2023 (7/1/2022 – 6/30/2023)</b> please provide the <i>estimated</i> number of unduplicated Dover beneficiaries that will benefit from this CDBG funded activity or project, not necessarily your entire client population (Note: these numbers will be monitored during the funding year):</p> <p>For <b>FY 2021 (7/1/2020 – 6/30/2021)</b> please provide the number of unduplicated Dover beneficiaries that benefited from this activity or program, not necessarily your entire client population:</p> <p>Were Dover CDBG funds used to fund this activity or project in FY 2022 (7/1/2021 – 6/30/2022):</p> <p style="padding-left: 40px;">If so, how much?</p>
<p><b>Beneficiary type:</b> (e.g. Homeless Individuals, Low-Income Households, etc.)</p>

NARRATIVE – <u>PUBLIC SERVICE ACTIVITY ONLY</u>
<p>Please provide a detailed description for the proposed <u>activity</u> (<i>not the organization</i>). This section should describe the use of funds, why the funds are needed and how the funds will ultimately benefit Dover low-moderate income individuals.</p> <p>Please indicate who prepared the overall cost estimate for the activity.</p>

NARRATIVE – <u>PUBLIC FACILITY PROJECT ONLY</u>
<p>Please provide the following information for the proposed <u>project</u> (<i>not the organization</i>):</p> <p>Describe the nature of the project:</p> <p>Describe how the project will ultimately benefit Dover low/moderate income individuals or Dover presumed benefit populations :</p> <p>Proposed project starting date:</p> <p>Proposed project completion date:</p> <p>Provide a total project cost broken down by major phases of the project (purchase property, clearing &amp; grading, foundation, building construction, etc.):</p> <p>Note: Written estimates, <u>based upon the information provided above</u>, are required and must be submitted with this application. Estimates must be prepared by qualified individuals/companies. Please include three estimates.</p>

PERFORMANCE OUTCOME MEASURES	
Provide the <u>outcomes</u> proposed & the <u>method of measurement</u> . You may list multiple outcomes.	
Outcome	Measurement
Example 1: Decrease in number of "latch-key kids" Example 2: Decreased dependence on emergency care facilities for non-emergency care of low/mod adults	Example 1: # of children who participate in afterschool program Example 2: Increase in number of low/mod income residents that seek care from health program.

DESCRIPTION OF <u>ORGANIZATION</u>
Please provide a description for the <u>organization or agency</u> that is undertaking the activity or project.

AUDIT AND EVALUATION
Does your organization have an annual CPA audit or other financial statement? If yes, please submit most recent audit or financial statements as an attachment to this application. Is your organization evaluated by outside agencies or programs? If yes, please note the agency/program and how often the evaluation occurs.

BOARD OF DIRECTORS	
Name	Residence (city/town)



## **BUDGET**

Use box 1 or 2 below to provide a budget. Include all proposed expenses. Note: Documentation must be kept that clearly tracks the use of the CDBG funds for the requested activities.

<b>1. Public Services (Non-Construction Projects)</b>			
	<b>A</b>	<b>B</b>	<b>A + B</b>
	<b>Dover CDBG Funds Requested</b>	<b>Other Funding</b>	<b>Total Proposed Budget</b>
Office Supplies			
Utilities			
Repairs/Maintenance			
Travel			
Salaries (List relevant positions)			
Other:			
<b>TOTAL PROPOSED BUDGET:</b>			

<b>2. Public Facilities: (Project)</b>			
	<b>A</b>	<b>B</b>	<b>A + B</b>
	<b>Dover CDBG Funds Requested</b>	<b>Other Funding</b>	<b>Total Proposed Budget</b>
<b>Hard Costs</b> <u>Note:</u> Federal wage rates may apply for some projects. Applicants are encouraged to obtain estimates that reflect wage rates estimates.			
Construction			
Other (list)			
<i>Total Hard Costs</i>			
<b>Soft Costs</b>			
Acquisition			
Appraisals			
Design/Engineering			
Other(list):			
<i>Total Soft Costs</i>			
<b>TOTAL PROPOSED BUDGET:</b>			

## FUNDING SOURCES

**Other Funding Sources** - please indicate the source and amount of other funding committed, pending or proposed for this project, if any. *Do not include Dover CDBG amount requested.*

Funding Source (Name(s) of funding source(s))	Committed, Pending or Proposed Amount (\$):		Total Amount (\$)	Explanation
Federal:	Committed:			
	Pending:			
	Proposed:			
State:	Committed:			
	Pending:			
	Proposed:			
Local:	Committed:			
	Pending:			
	Proposed:			
Private:	Committed:			
	Pending:			
	Proposed:			
Portsmouth CDBG:	Committed:			
	Pending:			
	Proposed:			
Rochester CDBG:	Committed:			
	Pending:			
	Proposed:			
Other:	Committed:			
	Pending:			
	Proposed:			
Total:	Committed:			
	Pending:			
	Proposed:			

**Organizational Commitment:** For public facility projects (building addition, new roof, replacement windows, etc.) – indicate the amount of funds that the organization will be contributing to the project.

Funding Source (Name of Parent Organization)	Committed, Pending or Proposed Amount (\$)		Explanation
	Committed:		
	Pending:		
	Proposed:		
Total:			

## AGENCY BUDGET

Please provide a breakdown of your *organization's* overall annual budget. Please indicate the dates of your budget period, i.e. July 1 to June 30 or January 1 to December 31.

Budget Period: from	to	Current Year	Next Year (projected)
<b>REVENUES</b>			
Federal Funds			
State Funds			
Foundations/Private Contributions			
United Way			
Fundraising or other income			
Other (describe)			
Community Dev. Block Grant (include anticipated request)			
<b>TOTAL REVENUE</b>			
<b>EXPENSES</b>			
Salaries			
Fringe Benefits			
Supplies (include printing/copying)			
Travel			
Training			
Communications			
Audit			
Property Maintenance			
Service Contracts			
Construction Supplies/Materials			
Other (describe)			
<b>TOTAL EXPENSES</b>			
<b>NET (Income - Expenses)</b>			

# **SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**

	Federal Grantor/Pass-Through Grantor/Program or Cluster Title	Federal CDEA Number	Pass-Through Entity's Identifying Number	Passed Through to Subrecipient	Total Federal Expenditures
U.S. Dept. of	[Agency Name]			\$	\$
Direct Program	[Program Name]				
Passed Through	[Entity Name]			\$	\$
	[Program Name]				
Total U.S. Dept. of	[Agency Name]			\$	\$
U.S. Dept. of	[Agency Name]			\$	\$
Direct Program	[Program Name]				
Passed Through	[Entity Name]			\$	\$
	[Program Name]				
Total U.S. Dept. of	[Agency Name]			\$	\$
U.S. Dept. of	[Agency Name]			\$	\$
Direct Program	[Program Name]				
Passed Through	[Entity Name]			\$	\$
	[Program Name]				
Total U.S. Dept. of	[Agency Name]			\$	\$
U.S. Dept. of	[Agency Name]			\$	\$
Direct Program	[Program Name]				
Passed Through	[Entity Name]			\$	\$
	[Program Name]				
Total U.S. Dept. of	[Agency Name]			\$	\$
<b>Total Expenditure of Federal Awards</b>				<b>\$</b>	<b>\$</b>
NH Dept. of	[Agency Name]			\$	\$
	[Program Name]				
Total NH Dept. of	[Agency Name]			\$	\$
NH Dept. of	[Agency Name]			\$	\$
	[Program Name]				
Total NH Dept. of	[Agency Name]			\$	\$
NH Dept. of	[Agency Name]			\$	\$
	[Program Name]				
Total NH Dept. of	[Agency Name]			\$	\$
Local Assistance:	[Agency Name]			\$	\$
	[Program Name]				
Total Local Assistance:	[Agency Name]			\$	\$
<b>Total State and Local Awards</b>				<b>\$</b>	<b>\$</b>
<b>TOTAL FEDERAL, STATE, &amp; LOCAL ASSISTANCE</b>				<b>\$</b>	<b>\$</b>

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT AND THAT IT CONTAINS NO FALSIFICATIONS, MISREPRESENTATIONS, INTENTIONAL OMISSIONS, OR CONCEALMENT OF MATERIAL FACTS.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
TITLE

### FFATA Checklist (contracts \$25,000 and over)

The Federal Funding Accountability and Transparency Act (FFATA) require the Office of Management and Budget (OMB) to maintain a single, searchable website that contains information on all Federal spending awards. As part of this, the City of Dover's CDBG program requires all agencies that meet the following thresholds to report when the agencies:

- had a gross income, from all sources, over \$300,000 in the agency's previous tax year, **and**
- have been awarded \$25,000 and over.

Please check box, sign and date below and return form if your agency does not meet the above thresholds. ☐

To Be Filled Out By Dover CDBG Staff	
Award title descriptive of the funding action	
CFDA program number for grant	14.218
Program source	CDBG
Amount of award	
To Be Filled Out By <u>Agency</u>	
Name of agency receiving award	
Address of the entity including:	
Place of performance including:	
Congressional district	
Total compensation and names of top five executives*	1.
	2.
	3.
	4.
	5.
DUNS number	
Central Contractors Registration (CCR) number**	

**\*Must give total compensation and names of top five executives if:**

(1) More than 80% of annual gross revenues are from the federal government, and those revenues are greater than \$25M annually, **and** (2) Compensation information is not already available through reporting to the SEC. \*\*Note: Because CCR registration expires annually, grantees are required to update their CCR information annually.

**How do you get a DUNS number?**

The unique identifier used in reporting to FFATA is the entity's Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) Number. For subgrantees, OMB has issued interim final guidance requiring such recipients to obtain a valid DUNS number. DUNS numbers may be requested via the web at: <http://fedgov.dnb.com/webform>

**\*\*What is a CCR and how do you register?**

CCR stands for Central Contractor Registration, which is the primary registrant database for the U.S. Federal Government. CCR collects, validates, stores, and disseminates data in support of agency acquisition missions. The link to information needed to register and become familiar with CCR is provided below.

Registration information: <http://www.ccr.gov/startregistration.aspx>

\_\_\_\_\_  
Signature of Authorized Person

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title